FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

10 OCT 21 PM 3: 44

Office Use Only

| 1. NAME OF COMMITTE | E (in full) | USE FEC MAIL OR TYPE OR P | | | mple:If typing er the lines | ı, type | | ······································ | | |
|---|------------------|------------------------------|-------------------------|----------------|--------------------------------|----------------|-----------|--|--------------------------|-----------------|
| Blumenthal for Senate | | | | | | | | | | |
| | | | | | | | | | | |
| ADDRESS (numb | per and street) | Blumenthal | for Senate |) | | | | ! ! 1 | | |
| ▼ Check i | k if different | 777 Summer Street | | | | | | | | |
| than pre | | Stamford CT 06901 | | | | | | | | |
| 2. FEC IDENTI | FICATION NUM | BER 🔻 | | CITY 🛕 | | | STATE | 1 | ZIP CODE | ▲ ▼ DISTRICT |
| C0047 | 3587 | | 3. IST | THIS PORT | NE (N) | | AM (A) | ENDED | ्र | [00] |
| 4. TYPE OF REPORT (Choose One) | | | | | | | | | | |
| (a) Quarter | (b) 12- | Day PRE | -Election Rep | | | | | | | |
| April 15 Quarterly Report (Q1) | | | | Ц | Primary (12 | 2P) | <u>~</u> | ral (12G) | R | unoff (12R) |
| July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) | | | | Ц | Convention | (12C) | Speci | al (12S) | | |
| | | | Election on 1 1 0 2 2 0 | | | | | o in the CT State of | | |
| January 31 Year-End Report (YE) | | | (c) 30- | Day POS | T-Election Re | eport for the: | | | | |
| | | | | | General (30 | DG) | Runol | ff (30R) | ☐ sı | pecial (30S) |
| п - | | .= | | | | | | 7 | in the | |
| ∐ ⊺e | rmination Report | (TER) | Ele | ction on | | L | | | State of | لبا |
| 5. Covering Per | iod 10 | 01 | 201 | 0 | through | 10 | 1 3 | | 2010 | |
| Locality that I have examined this Depart and to the heat of my knowledge and helief it is true assess and assessed | | | | | | | | | | |
| I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Ellen Camhi | | | | | | | | | | |
| Signature of Treasurer Ellen Cambi Date 10 21 2010 | | | | | | | | | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. | | | | | | | | | | |
| Office Use Only | | | | | | | | | EC FORM Revised 02/20 | |

FE5AN018

90